



**DOWN PAYMENT ASSISTANCE LOAN PROGRAM  
FOR  
PUBLIC SCHOOL EMPLOYEES, CITY EMPLOYEES AND CHILDCARE TEACHERS**

**CERTIFICATIONS**

**EMPLOYER CERTIFICATION:**

I acknowledge that \_\_\_\_\_ is a full-time, permanent employee with \_\_\_\_\_. **FOR SCHOOL DISTRICTS ONLY:** I also acknowledge that this employee is employed by a school district serving Sunnyvale and assigned to a school where the majority of students are residents of Sunnyvale. **FOR CHILD CARE PROVIDERS ONLY:** I acknowledge that this employee is a teacher qualified under the State Title requirements.

Executed on \_\_\_\_\_ at \_\_\_\_\_, California.

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Title

**CERTIFICATION OF APPLICANT(S):**

I/We declare under penalty of perjury under the laws of the State of California that the information on this application is true, correct and complete to the best of my/our knowledge. I/We have read the Program Guidelines for the City of Sunnyvale's Down Payment Assistance Loan Program for Public School Employees, City Employees and Childcare Teachers Program under which I/We am/are applying for a loan and agree to the Program's loan terms. I/We understand that the City monitors the property ownership and owner-occupancy status of properties assisted through the City's Down Payment Assistance Loan Program for Public School Employees, City Employees and Childcare Teachers Program, and I/We agree to respond promptly to any and all requests for information that I/We may receive from the City in carrying out its monitoring responsibilities.

Executed on \_\_\_\_\_ at \_\_\_\_\_, California.

Signature of Applicant(s):

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Co- Applicant

\_\_\_\_\_  
Co- Applicant